

HOUSING DIVISION

Single-family Residential Tax Incentive

New Construction/Renovation/Residential Conversions
PHASE 1

READY FOR REVITALIZATION APPLICATION

Phase One: Preconstruction Condition Certification consist of a two-phase			e 2 (Post Construction)
Application Fee: \$			
Plan Approval Date:	Permit Date:		
Section 1 – Property Owner a	and Developer Information		
Permanent Parcel Identificati	on No.:	Ye	ar Built:
Property Address:		Zi	p Code:
Current Market Value Total (Land As indicated on Franklin County Aug		#	of Units:
Property Owner:			
Developer (if applicable)		Contac	ct
Mailing Address (if different):			
Phone Number:		Email Address:	

INSTRUCTIONS:

- a. Please complete section A through E (Pages 1-3) for Phase 1 and Section E through H (Pages 4-6) for Phase 2.
- b. Complete a separate application for each Parcel Identification Number.
- c. List Property Address as shown on Franklin County's website or submit a copy of City of Columbus Certified House Number/Address Plat for address changes.
- d. Processing time may take up to 6 weeks to complete applications.

Section 2 – Property Information

A.	* * *	RA): one of seven (7) Columbus CRA's. (maps and additional information is abus.gov/housingdivision/residentialtaxincentives/
	☐ Hilltop: Area D	☐ North Central
	Livingston and James	Southside: Area C
	Milo-Grogan	☐ Weinland Park: Area F
	☐ Near East	
B.	Construction & Occupancy Type (R	<u>equired)</u> :
	1. Type of Improvement:	
	☐ New Construction - (New	Build without Existing Structure).
	Renovation - (Alter, Ren Conversion from Non-resi	nodel, Restore, Improve Existing Structure or New Garage Build) idential to Residential
	2. Occupancy:	
~	Owner-occupied	☐ Rental
C.	Construction Estimates: 1. New Construction	
	1. New Constitution	
	a. Estimated total cost of New	Construction: \$
	2. Renovation:	
	Estimated total cost of Reno	overtion: \$
		ovation: \$
	3. Written Description	
		crative of improvements to include Scope of Work and the following are Footage 2) Number of bedrooms and baths 3) Garage spaces and include tached.
	4. Bid Estimate from contractor	(Attach copy).
	5. Projected Completion Date:	/ /
	6. Building Permit Number (Att	ach copy)
	7. Submit the following Photos:	
	b. Front and rear photos of pro	perty to be renovated. (Attach copy) Interior projects. (Attach copy)

Section 3 – Affordability Election E. Applicant Certification for Phase One Preconstruction Application: **Does Property Owner owe:** 1. Any delinquent taxes to the State of Ohio or a political subdivision of the State? Yes No 2. Any other monies to the State or a political subdivision of the State that are past due, whether the amounts owed are being contested in a court of law or not? Yes No If yes to either of the above, please provide on a separate sheet of paper details of each incident, including the date, location, amounts and case or identification numbers (Attach to Application). The applicant certifies that all information in this application and all information furnished in support of this application are true and complete to the best of the applicant's knowledge and belief. Submission of this application expressly authorizes the City of Columbus to confirm statements contained within this application and to review applicable confidential records. As part of this application, the applicant authorizes the City of Columbus to request, directly to the City Division of Income Tax and/or the Ohio Department of Taxation, to release specific tax records to the City of Columbus, should issues of delinquent taxes arise. I declare under the penalties of falsification (ORC Section 9.66(C)(1) and 2931.13(D)(1)) that this application, including all accompanying documents and statements, has been examined by me, and to the best of my knowledge are true, correct, and complete.

Please <u>mail or submit in-person</u> **originals** of pages 1-3 of this application to:

Date

Department of Development, Housing Division
Attn: Michelle Castrogiovanni, Residential Tax Incentive Program
111 N. Front Street, 3rd Floor
Columbus, OH 43215

Signature of Owner(s) of property as recorded

Printed Name and Title

For further information regarding this program please call Michelle Castrogiovanni at (614) 645-3219 or by e-mail at mrcastrogiovanni@columbus.gov or visit our web site at: https://columbus.gov/housingdivision/residentialtaxincentives/

HOUSING DIVISION

Single-family Residential Tax Incentive

New Construction/Renovation/Residential Conversions

PHASE 2

READY FOR REVITALIZATION APPLICATION

Phase Two: Post Construction Certification for Tax Abatement for Three or Less Units

A.		reas (CRA): d within one of seven (7) Columbus CRA's. (maps and additional information is s://columbus.gov/housingdivision/residentialtaxincentives/
	Hilltop: Area D	North Central
	Livingston and James	Southside: Area C
	☐ Milo-Grogan	Weinland Park: Area F
	☐ Near East:	
	Occupancy: Owner-oction 1 – Property Owner and	Developer Information
	rmanent Parcel Identification	
Pr	operty Address:	# of Units:
Pro	oject Name (if applicable):	Management Company:
Pr	operty Owner/Developer:	
Ma	ailing Address:	
Phone Number:		Email Address:
	3. Applicant agree4. Property will be	Please Note: il Applications. plications <u>will</u> be delayed. es to supply additional information upon request. e subject to annual exterior inspection during the abatement period. mic Development at (614) 645-8616 for Non-Residential Tax Incentives.

C. Final Construction Information:

1.		w Construction – (New Build Improvement without existing structure). pplying for New Construction, please complete this section, and submit the following:
	a.	Total <u>actual cost</u> of new construction \$
	b.	Building Permit Number (Attach copy)
	c.	Issuance Date of Building Permit
	d.	FINAL Certificate of Occupancy (Attach copy)
	e.	Completion Date / /
	f.	Proof of ownership, such as Closing Disclosure or Franklin County Auditor Summary (Attach copy)
	g.	Photos of Front and Back of exterior property.
2.		novation: - (Alter, Remodel, Restore, Improve existing structure or New Garage Build) pplying for Renovation, please complete and submit the following:
	a.	Total <u>actual cost</u> of Renovation \$
	b.	Include with the application documentation to support <u>total</u> cost of Renovation: (Attach copy)
		Three acceptable examples are:
		i. Notarized Affidavit of <u>final draw payments</u> of the construction contract and a <u>description of the work</u>
		completed.
		ii. Notarized List to include general categories of the work completed, the date the work was completed,
		and each category's expense. A labor cost for your own work can also be included.
		iii. AIA Application and Certificate for Payment Document G702
	c.	Building Permit Number (Attach copy)
	d.	Issuance Date of Building Permit / /
	e.	Certificate of Occupancy (Attach copy) Completion Date:
		A separate Certificate of Occupancy is required if the improvement included an addition, alteration or if the property was vacant prior to construction. Contact Building and Zoning Services at (614) 645-7433 to obtain a copy or for more information.
	f.	Proof of ownership, such as Closing Disclosure or Franklin County Auditor Summary (Attach copy)
	g.	Photos of Front and Back of property and completed project (Attach copy)

D. Applicant Certification for Phase Two Certification Application:

The applicant certifies that all information in this application and all information furnished in support of this application are true and complete to the best of the applicant's knowledge and belief. Submission of this application expressly authorizes the City of Columbus to confirm statements contained within this application and to review applicable confidential records. As part of this application, the applicant authorizes the City of Columbus to request, directly to the City Division of Income Tax and/or the Ohio Department of Taxation, to release specific tax records to the City of Columbus, should issues of delinquent taxes arise.

I declare under the penalties of falsification (ORC Section 9.66(C)(1) and 2931.13(D)(1)) that this application, including all accompanying documents and statements, has been examined by me, and to the best of my knowledge are true, correct, and complete.

Signature of Owner(s) of property as recorded	Date
Printed Name and Title	

Please mail or submit in-person **originals** of pages 1-3 of this application to:

Department of Development, Housing Division
Attn: Michelle Castrogiovanni, Residential Tax Incentive Program
111 N. Front Street, 3rd Floor
Columbus, OH 43215

For further information regarding this program please call Michelle Castrogiovanni at (614) 645-3219 or by e-mail at mrcastrogiovanni@columbus.gov or visit our web site at: https://columbus.gov/housingdivision/residentialtaxincentives/